



DEPARTMENT OF HEALTH AND HUMAN SERVICES
ANNUAL REPORT OF OUTSIDE ACTIVITY

Executive Branch Financial Disclosure Regulation
HHS Supplemental Financial Disclosure Regulation
(5 CFR Part 2634, 5 CFR Part 5502)

CALENDAR YEAR REPORTING PERIOD 20 DUE ANNUALLY ON FEBRUARY 28	EXTENSION DATE	DATE REPORT FILED
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I. EMPLOYEE INFORMATION

1. EMPLOYEE'S NAME (Last, First, MI)		
2. AGENCY (Operating/Staff Division)		(Subcomponent)
3. TITLE OF POSITION	4. GRADE/STEP	5. FEDERAL SALARY
6. APPOINTMENT TYPE <input type="checkbox"/> PAS/PA <input type="checkbox"/> Non-Career SES <input type="checkbox"/> Career SES <input type="checkbox"/> Schedule C <input type="checkbox"/> Commissioned Corps <input type="checkbox"/> GS <input type="checkbox"/> Title 42 <input type="checkbox"/> Other _____		7. FINANCIAL DISCLOSURE FILING STATUS <input type="checkbox"/> Public (SF 278) <input type="checkbox"/> Confidential (OGE 450) <input type="checkbox"/> None
8. OFFICE ADDRESS STREET		
CITY		STATE ZIP
9. OFFICE CONTACT INFORMATION		
TELEPHONE ()		FAX ()
CELL ()		EMAIL
10. NAME OF IMMEDIATE SUPERVISOR		11. TITLE OF SUPERVISOR
12. SUPERVISOR CONTACT INFORMATION		
TELEPHONE ()		FAX ()
CELL ()		EMAIL

AGENCY USE ONLY

II.

OUTSIDE ACTIVITY INFORMATION

1. Outside Activity List

List below all outside activities for which prior approval is required that were approved or undertaken within the last calendar year. Provide the date of approval, identify the person for whom or the organization with which the activity was to be conducted, and check the box marked (✓) if the activity was actually performed.

OUTSIDE ACTIVITY	PERSON OR ORGANIZATION	APPROVAL DATE (mm/dd/yy)	(✓)
A.			<input type="checkbox"/>
B.			<input type="checkbox"/>
C.			<input type="checkbox"/>
D.			<input type="checkbox"/>
E.			<input type="checkbox"/>

2. Duration

In the line that corresponds to the same letter that identifies the activity above, provide, for each outside activity actually performed, the beginning date of the relationship with the outside entity, the date(s) personal services were provided, and the total number of hours spent and leave used on the activity in the last calendar year. Specify the ending date; or for an ongoing activity, indicate how long the activity may continue and the date prior approval expires. Check whether renewal is anticipated.

BEGINNING DATE (mm/dd/yy)	SERVICE DATE(S) (mm/dd/yy)	HOURS SPENT	LEAVE USED	ENDING DATE (mm/dd/yy)	RENEWAL ANTICIPATED?
A.					<input type="checkbox"/> Yes <input type="checkbox"/> No
B.					<input type="checkbox"/> Yes <input type="checkbox"/> No
C.					<input type="checkbox"/> Yes <input type="checkbox"/> No
D.					<input type="checkbox"/> Yes <input type="checkbox"/> No
E.					<input type="checkbox"/> Yes <input type="checkbox"/> No

3. Income and/or Reimbursements Paid

In the line that corresponds to the same letter that identifies the activity above, provide, for each outside activity actually performed, the type and amount of any income and/or reimbursements actually received during the last calendar year and the date paid. If none, check the box.

PAYMENT RECEIVED	INCOME AND/OR REIMBURSEMENT TYPE	AMOUNT	DATE(S) PAID (mm/dd/yy)
A. <input type="checkbox"/> None		\$	
B. <input type="checkbox"/> None		\$	
C. <input type="checkbox"/> None		\$	
D. <input type="checkbox"/> None		\$	
E. <input type="checkbox"/> None		\$	

4. Income and/or Reimbursements Due

In the line that corresponds to the same letter that identifies the activity above, provide, for each outside activity actually performed, the type and amount of any income and/or reimbursements earned during or attributable to the last calendar year that were not in fact received during the reporting period and remain due, and indicate the expected date of payment. If none, check the box.

PAYMENT DUE	INCOME AND/OR REIMBURSEMENT TYPE	AMOUNT	DATE(S) PAYMENT DUE (mm/dd/yy)
A. <input type="checkbox"/> None		\$	
B. <input type="checkbox"/> None		\$	
C. <input type="checkbox"/> None		\$	
D. <input type="checkbox"/> None		\$	
E. <input type="checkbox"/> None		\$	

5. Employee Questions

- a. Have you been appointed or reassigned to a different Federal position within the Department since any outside activity reported on this form was approved or undertaken?

☐ Yes (If this box is checked, answer when and explain. Copies of the approved HHS Form 520 for each activity should be provided to any new supervisor.)

☐ No

- b. Have the duties and responsibilities of your current Federal position changed since any outside activity reported on this form was approved or undertaken?

☐ Yes (If this box is checked, answer when and explain.)

☐ No

- c. For any outside activity reported on this form, has any change occurred or is any change anticipated with respect to the information previously furnished on the corresponding HHS Form 520?

☐ Yes (If this box is checked, explain.)

☐ No

- d. For any outside activity reported on this form, has the nature, scope, or subject matter changed?

☐ Yes (If this box is checked, explain.)

☐ No

- e. Did you answer "Yes" to one or more of the Questions 5. a., b., c., or d.? If so, a revised request for approval must be submitted on a new HHS Form 520.

☐ Yes (If this box is checked, submit the form to your immediate supervisor.)

☐ No

6. CERTIFICATION

The undersigned employee certifies that the notices in Part VI have been read and understood and that the statements made and information provided on this form are true, complete, and correct to the best of the individual's knowledge.

EMPLOYEE SIGNATURE

DATE

1. Summary of Applicable Law

An employee cannot undertake an outside activity that conflicts with the employee's official duties. An activity conflicts with official duties: (a) if it is prohibited by statute or regulation; or (b) if, under the standards in 5 CFR 2635.402 and 2635.502, it would require the employee's recusal from matters so central or critical to the performance of his or her official duties that the employee's ability to perform the duties of his or her position would be materially impaired. Such a recusal would likely arise where the outside activity involves a person or entity that is regulated by, does business with, receives grants or other benefits from, or is otherwise substantially impacted by the programs, policies, and operations of the employee's agency, and the employee normally would be involved personally and substantially in such matters on a frequent basis or as a principal duty. In addition, an activity may be improper if the circumstances suggest that the employee received an outside business opportunity based on his or her official position or would create the appearance of using public office for the private gain of an outside entity. An employee also must endeavor to avoid any actions that create the appearance of a violation of law or the ethical standards. Special rules apply to activities involving fundraising, expert witness testimony, teaching, speaking, writing, or editing, and activities with foreign entities. Certain categories of employees, such as those in FDA, NIH, and OGC, are subject to component specific rules on outside activities. Refer to the Standards of Ethical Conduct, 5 CFR part 2635, subpart H, and the HHS Supplemental Ethics Regulation, 5 CFR part 5501.

2. Review

The undersigned supervisor, identified in Part I, Item 10, has evaluated the responses and any supporting documentation of the employee, reviewed the HHS Form 520s on file, and obtained additional information where appropriate. Based on this information, the supervisor makes the following determination:

☐ **No Action Required**

(If this box is checked, the undersigned concludes that the employee is in compliance with applicable laws and regulations (subject to any comments in the box below) and that no legal or ethical impediment has been identified that would have precluded the approval of any listed outside activity or that would require the cancellation of any ongoing outside activity. Describe the basis for this conclusion in the "Comments" box below.)

☐ **Corrective Action Required** *(If this box is checked, describe in the "Comments" box below.)*

SUPERVISOR SIGNATURE

DATE

3. Comments

1. Name of Reviewer		2. Title of Reviewer	
3. Reviewer Contact Information			
TELEPHONE ()		FAX ()	
CELL ()		EMAIL	
4. Organization			
5. Committee If the reviewer acts on behalf of a committee, identify the body and record any dissenting views in the "Comments" box below.			
6. Review Review the employee's answers and indicate whether you concur in the supervisor's determination. Explain your reasons in the space below. Sign and date the form in the space provided. <input type="checkbox"/> Concur <input type="checkbox"/> Nonconcur			
REVIEWER SIGNATURE			DATE
7. Comments			

V.	AGENCY ETHICS OFFICIAL REVIEW
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1. Name of Agency Ethics Official	2. Title of Agency Ethics Official
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3. Agency Ethics Official Contact Information	
TELEPHONE ()	FAX ()
CELL ()	EMAIL

4. Organization

5. Ethics Review Review the employee's answers and the supervisor's determination. Consider the assessment of any management official, committee, or other intermediate reviewer. Indicate whether you concur in the supervisor's determination. Explain your reason(s) in the space below and describe any actions deemed necessary to ensure compliance with applicable ethics laws. Sign and date the form in the space provided. <input type="checkbox"/> Concur <input type="checkbox"/> Nonconcur

AGENCY ETHICS OFFICIAL SIGNATURE	DATE
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6. Comments

APPROVAL OF AN OUTSIDE ACTIVITY DOES NOT RELEASE YOU FROM A CONTINUING LEGAL OBLIGATION TO DISQUALIFY YOURSELF FROM OFFICIAL ASSIGNMENTS AFFECTING YOUR OUTSIDE EMPLOYER OR THE ENTITY TO WHICH YOU ARE PROVIDING PERSONAL SERVICES. WHILE PERFORMING AN APPROVED OUTSIDE ACTIVITY, ANY ACTIONS TAKEN IN CONFLICT WITH APPLICABLE ETHICS LAWS MAY SUBJECT YOU TO CRIMINAL PROSECUTION OR DISCIPLINARY PROCEEDINGS.

Caution. When you consult, teach, speak, write, serve on a board, or work for a company, organization, or other entity outside your government job, your relationship with that outside entity has certain legal and ethical consequences. The approval of an outside activity does not mean that you are free of conflicts of interest. You must still follow all substantive ethics requirements after approval is granted. Consult the ethics regulations at 5 CFR 2635.802 and 5501.106(d)(5) which are reprinted below.

Conflicts Resolution. An approved HHS Form 520 does not signify that you need not be concerned about conflicts of interest. Under the law, conflicts of interest arising out of outside employment or service in a fiduciary position can be resolved in advance in only three ways: (1) you can inform your supervisor and disqualify yourself from participating in a conflicting government matter (often called a *recusal*); (2) you can seek, if certain legal requirements are satisfied, a separate legal document from your appointing official or designee that specifically permits you to work on the government matter (known as a *waiver*), or (3) you can resign from either your government or outside job. Outside relationships that fall short of actual employment or a fiduciary role pose similar appearance concerns that must be addressed under procedures in 5 CFR 2635.502.

Effect of Prior Approval. The outside activities prior approval process has very limited purposes. When a reviewer approves an HHS Form 520 for your outside activity, two fundamental assessments are being made, which are discussed below. You reasonably may rely on these specific determinations only if you provided all relevant information on the form and the circumstances under review do not thereafter change. You remain responsible for the legal and ethical consequences of any change in personal or business affairs or a change in your government duties.

First, based on the information which you provide, the reviewer determines whether your proposed activity is plainly prohibited by applicable statutes or regulations, including the provisions of the ethical standards governing appearances of impropriety. For example, if you want to lobby Federal agencies on behalf of a non-profit organization that employs you, prior approval will be denied because a criminal statute prohibits such representational activities.

Second, assuming your proposed activity is not specifically prohibited, the reviewer determines whether, under the circumstances, approval should be denied for other reasons specified under the law. For example, the reviewer may deny approval if the facts show that you used your government position to obtain an outside compensated business opportunity or if the activity would create the appearance that you are violating the law or the ethical standards. Another common reason for denying approval is that the outside activity may prevent you from handling work that is expected of you. Because the outside activity may cause you to have to disqualify yourself from a broad range of job assignments, or even a few crucial projects, that will affect your outside employer or the entity to which you provide personal services, it may be impossible for you to discharge fully your government duties.

If, however, your outside activity is approved, the reviewer has determined that the matters in which you will not be allowed to participate are not "so central or critical to the performance of [your] official duties" that your ability to perform the duties of your position would be materially impaired. In other words, you cannot work on a government matter affecting your outside employer, but the reviewer expects that you will be able to stay away from these assignments and still do your job.

Recusal Obligations. When performing your Federal duties, you must not participate in any government matter that will affect your own self-interest in continuing your outside job or activity. For example, you would have to disqualify yourself from participating in any official matter that might put your outside employer out of business or seriously affect its finances, either positively or negatively, so that the odds of your remaining employed are also affected. In addition, when you work for an outside employer or serve in a fiduciary role with an organization, the financial interests of that company or organization are considered to be your own. As a result, if the company or organization has a financial interest in how a government matter will be resolved, you cannot work on that matter. This means that you cannot work on a government matter that involves or affects your outside employer as a specific party, such as a contract, grant, audit, investigation, or litigation. The law also requires you to stay away from government matters that are larger in scope, such as deliberations and decisions on developing, implementing, or enforcing statutes, regulations, policies, studies, or proposals, that will have an effect on a large class of employers like the one for which you work on the outside. For example, if you were permitted to have an outside position as an employee of a hospital, a drug company, or a nonprofit organization, you could not participate personally in any significant way in a policy decision that affects the financial interests of the industry or organizational sector in which these employers operate. Under certain limited circumstances, a waiver for such "particular matters of general applicability" can be considered, if you notify your appointing official in advance and receive a written determination. Outside relationships that fall short of actual employment or a fiduciary role pose similar appearance concerns, but the recusal obligation is limited to specific party matters.

Scope of Recusal. Although many employees understand the need to disqualify themselves from participating in an official matter that affects their outside employer, they often believe erroneously that they can pick and choose among the various aspects of a particular matter and stay away only from the important decisions. Such incomplete recusals will not protect you from a criminal conflict of interest violation. Unless a waiver, approved in advance, identifies specific permitted activities, you must refrain entirely and absolutely from participating personally and substantially in a government matter that affects your own financial interest or that of an outside employer. When you are involved significantly in proposing, planning, advising, deciding, or implementing some official action, and you do so individually or by actively directing subordinates, your participation is personal and substantial.

EXCERPTS FROM THE STANDARDS OF ETHICAL CONDUCT FOR EMPLOYEES OF THE EXECUTIVE BRANCH AND THE DEPARTMENT OF HEALTH AND HUMAN SERVICES SUPPLEMENTAL AGENCY ETHICS REGULATIONS:

TITLE 5 CODE OF FEDERAL REGULATIONS

§ 2635.802 Conflicting outside employment and activities.

An employee shall not engage in outside employment or any other outside activity that conflicts with his official duties. An activity conflicts with an employee's official duties:

(a) If it is prohibited by statute or by an agency supplemental regulation; or

(b) If, under the standards set forth in §§ 2635.402 and 2635.502, it would require the employee's disqualification from matters so central or critical to the performance of his official duties that the employee's ability to perform the duties of his position would be materially impaired.

Employees are cautioned that even though an outside activity may not be prohibited under this section, it may violate other principles or standards set forth in this part or require the employee to disqualify himself from participation in certain particular matters under either subpart D or subpart E of this part.

Example 1: An employee of the Environmental Protection Agency has just been promoted. His principal duty in his new position is to write regulations relating to the disposal of hazardous waste. The employee may not continue to serve as president of a nonprofit environmental organization that routinely submits comments on such regulations. His service as an officer would require his disqualification from duties critical to the performance of his official duties on a basis so frequent as to materially impair his ability to perform the duties of his position.

Example 2: An employee of the Occupational Safety and Health Administration who was and is expected again to be instrumental in formulating new OSHA safety standards applicable to manufacturers that use chemical solvents has been offered a consulting contract to provide advice to an affected company in restructuring its manufacturing operations to comply with the OSHA standards. The employee should not enter into the consulting arrangement even though he is not currently working on OSHA standards affecting this industry and his consulting contract can be expected to be completed before he again works on such standards. Even though the consulting arrangement would not be a conflicting activity within the meaning of § 2635.802, it would create an appearance that the employee had used his official position to obtain the compensated outside business opportunity and it would create the further appearance of using his public office for the private gain of the manufacturer.

§ 5501.106(d)(5) Standard for approval.

Approval shall be granted only upon a determination that the outside employment or other outside activity is not expected to involve conduct prohibited by statute or Federal regulation, including 5 CFR part 2635 and this part.

Note: The granting of approval for an outside activity does not relieve the employee of the obligation to abide by all applicable laws governing employee conduct nor does approval constitute a sanction of any violation. Approval involves an assessment that the general activity as described on the submission does not appear likely to violate any criminal statutes or other ethics rules. Employees are reminded that during the course of an otherwise approvable activity, situations may arise, or actions may be contemplated, that, nevertheless, pose ethical concerns.

Example 1: A clerical employee with a degree in library science volunteers to work on the acquisitions committee at a local public library. Serving on a panel that renders advice to a non-Federal entity is subject to prior approval. Because recommending books for the library collection normally would not pose a conflict with the typing duties assigned the employee, the request would be approved.

Example 2: While serving on the library acquisitions committee, the clerical employee in the preceding example is asked to help the library business office locate a missing book order. Shipment of the order is delayed because the publisher has declared bankruptcy and its assets, including inventory in the warehouse, have been frozen to satisfy the claims of the Internal Revenue Service and other creditors. The employee may not contact the Federal bankruptcy trustee to seek, on behalf of the public library, the release of the books. Even though the employee's service on the acquisitions committee had been approved, a criminal statute, 18 U.S.C. 205, would preclude any representation by a Federal employee of an outside entity before a Federal court or agency with respect to a matter in which the United States is a party or has a direct and substantial interest.

PRIVACY ACT STATEMENT

The Ethics in Government Act, 5 U.S.C. App. § 101, *et seq.*, Executive Order 12674, as amended by Executive Order 12731, Sections 301 and 7301 of Title 5 of the U.S. Code, and Sections 2634.103, 2635.803, 5501.106(d), 5502.102, and 5502.103 of Title 5 of the Code of Federal Regulations authorize the collection of this information. Disclosure of this information is mandatory for employees who have received prior authorization from an agency designee to pursue outside employment or activities pursuant to Sections 2635.803 and 5501.106(d) of Title 5 of the Code of Federal Regulations or who have performed an outside activity for which prior approval under those sections is required. Failure to provide all or part of the requested information may result in cancellation of approval for any continuing outside employment or activity. Falsification of information or failure to file or report information required to be reported may subject the employee to disciplinary action. Knowing and willful falsification of information required to be reported may subject the employee to criminal prosecution. The primary use of this information is to allow HHS supervisors, management officials, and agency ethics officials to determine whether the continuation of a previously approved outside activity would pose a conflict of interest as a result of any modification in an employee's duties or assignments or change in the activities or operations of the outside entity. The information may also be used to evaluate the determinations concerning employee requests for prior approval of outside employment or activities in order to prevent other violations of the statutes, regulations, and executive orders governing employee conduct. The information is also requested, pursuant to 5 C.F.R. §§ 2638.203(b)(9),(10), and (11), for the purpose of evaluating ethics program administration, as well as the Department's supplemental ethics regulations, to determine their continued adequacy and effectiveness in relation to current agency responsibilities and to ensure that prompt and effective action is taken to remedy violations or potential violations, or appearances thereof, of conflict of interest and related ethics provisions. Additionally, this information may be disclosed to: (1) the Office of Personnel Management, Office of Government Ethics, Merit Systems Protection Board, Office of the Special Counsel, Equal Employment Opportunity Commission, Federal Labor Relations Authority, Federal Service Impasses Panel, Federal Mediation and Conciliation Service, and an arbitrator, in carrying out their functions; (2) a Federal, State, or local agency charged with investigating or prosecuting violations of, or implementing, the law, in the event there is an indication of a violation or potential violation of civil, criminal or regulatory law; (3) a Federal, State, or local agency maintaining enforcement records or other pertinent records, such as current licenses, if necessary to obtain a record relevant to an agency decision concerning the hiring or retention of an employee, the issuance of a security clearance, the letting of a contract, or the issuance of a license, grant or other benefit; (4) the National Archives and Records Administration or the General Services Administration in records management inspections; (5) the Office of Management and Budget during legislative coordination on privacy relief legislation; (6) Federal agencies with power to subpoena other Federal agencies' records; (7) a court or party in a court or Federal administrative proceeding if the Government is a party or in order to comply with a judge-issued subpoena; (8) private firms with which the Department may contract for the purpose of collating, analyzing, aggregating or otherwise refining records; (9) a Member of Congress or a Congressional office, pursuant to an inquiry made at the request of the individual who is a subject of the record; (10) the Department of Justice in defense of litigation; and (11) contractors and other non-Government employees working for the Federal Government to accomplish a function related to an Office of Government Ethics Government-wide system of records. This confidential report will not be disclosed to any requesting person unless authorized by law. See the OGE/GOVT-2 Government-wide executive branch system of records.

ADDITIONAL SPACE

Identify the part and item number to which the additional information refers.



**Department of Health and Human Services
Office of the Secretary
Office of the General Counsel
Ethics Division
Washington, DC 20201
(202) 690-7258**

INDIAN HEALTH SERVICE
Area and Service Units
Annual Report of Outside Activity – HHS-521
Instructions

Due Date: Tuesday, February 28 – to Supervisor
Wednesday, March 8 – from Supervisor to Area Ethics Contact
Wednesday, March 29 –from Area Director to Program Integrity and Ethics
Staff, IHS Headquarters

Employee: Getting Started

1. Gather information on all outside activities and other outside employment which must be reported. See the “Outside Activity Information” section, below.
2. The HHS-521 is available at <http://www.ihs.gov/AdminMngrResources/pies/pies-forms.asp> and http://intranet.hhs.gov/forms/hhs_forms.html.

Part I. Employee Information

1. Employee’s Name: Self-explanatory
2. Agency: Indian Health Service
Operating/Staff Division: Area/Program Office
Subcomponent: Service Unit/Division/etc.
3. Title of Position: Self-explanatory
4. GS/WG Grade/Step or CO Grade/Rank
5. Annual Federal Salary
6. Appointment Type: Self-explanatory
7. Financial Disclosure Filing Status: Self-explanatory
8. Office Address: Provide complete mailing address
9. Office Contact Information: Self-explanatory
10. Name of Immediate Supervisor : Self- explanatory
11. Title of Supervisor: Self-explanatory
12. Supervisor Contact Information: Self-explanatory

II. Outside Activity Information

Report all outside activities and employment approved by the HHS-520 and any activities in which you engaged that should have received advanced approval. Report activities and employment which may have been approved in a previous year but which occurred at any time the calendar year covered by the report (2005).

Note that each line is designated with a letter. In the following section, add information about **each** activity by letter.

1. Outside Activity List: Complete the information requested.
 - Outside Activity – teaching, consulting, professional practice, coach, etc.
 - Person or Organization – name of the entity for which you work.
 - Approval Date – date of the latest approval to engage in the Outside Activity.
 - Add a checkmark (✓) to indicate whether you actually engaged in the activity.
2. Duration: Self-explanatory. Enter the actual dates and times.
 - Beginning Date – The date the activity started.
 - Service Date(s) – The Dates you actually engaged in the activity (may be different from date started).
 - Hours Spent – Total number of hours you worked on the activity in 2005.
 - Leave Used – Total number of hours of leave you used to work on the activity.
 - Ending Date – The date you completed the work associated with the activity.
 - Renewal Anticipated – Indicate whether you expect to request renewal of the activity during the 30 days preceding the end date (January 2006).
3. Income and/or Reimbursements Paid. Read the instructions carefully. Report travel expenses reimbursed or provided in kind separate from payment, e.g., honorarium, fee, etc.
4. Income and/or Reimbursements Due. Read the instructions carefully. Report travel expenses, reimbursements, and/or payment you expect to receive but have not yet received.
5. Employee Questions. Self-explanatory. If you need more space, continue on page 10 of the form.
6. Certification. Carefully read the certification: Sign and date the form indicating that you have read it and reported everything accurately.

Make a copy for yourself and forward the completed form HHS-521 to your supervisor.

III. Supervisor Review

1. Read the Summary of Applicable Law. Contact your Area Ethics Contact if you have questions.

2. Review report and any additional information. Mark the appropriate box, sign, and date. Add any comments in block #3.
3. Comments: Self-explanatory

Forward the completed form HHS-521 to the Area Ethics Contact.

IV. Management/Committee/Other Intermediate Review

1. Name of Reviewer: Area Ethics Contact's Name
2. Title of Reviewer: Area Ethics Contact
3. Reviewer Contact Information: Self-explanatory
4. Organization: IHS/Area/Service Unit/Division
5. Committee: Not Applicable
6. Review: Check the appropriate box, sign, and date.
7. Comments: Any additional comments and recommendations.

The Area Ethics Contact will then forward the completed HHS-521 to the Area/Office Director.

V. Agency Ethics Official Review

1. Name of Agency Ethics Official: Area/Office Director's Name
2. Title of Agency Ethics Official: Self-explanatory
3. Agency Ethics Official Contact Information: Self-explanatory
4. Organization: Self-explanatory
5. Ethics Review: Leave blank. This will be completed by the Program Integrity and Ethics Staff and the Deputy Ethics Counselor.
6. Comments: Area/Office Director sign and date with concurrence/non-concurrence. Make two copies of the full report, one for the employee and one for the Area Ethics Contact. The original HHS-521 will be sent to the Program Integrity and Ethics Staff.

The employee must receive a signed copy of the completed/reviewed/signed HHS-521.

Prepared by the IHS/OMS/Program Integrity and Ethics Staff/January 2006.

INDIAN HEALTH SERVICE
Headquarters
Annual Report of Outside Activity – HHS-521
Instructions

Due Date: Tuesday, February 28 – to Supervisor
Wednesday, March 8 – from Supervisor to Program Integrity and Ethics Staff

Employee: Getting Started

1. Gather information on all outside activities and other outside employment which must be reported. See the “Outside Activity Information” section, below.
2. The HHS-521 is available at <http://www.ihs.gov/AdminMngrResources/pies/pies-forms.asp> and http://intranet.hhs.gov/forms/hhs_forms.html.

Part I. Employee Information

1. Employee’s Name: Self-explanatory
2. Agency: Indian Health Service
Operating/Staff Division: Office
Subcomponent: Division
3. Title of Position: Self-explanatory
4. GS/WG Grade/Step or CO Grade/Rank
5. Annual Federal Salary
6. Appointment Type: Self-explanatory
7. Financial Disclosure Filing Status: Self-explanatory
8. Office Address: Provide complete mailing address
9. Office Contact Information: Self-explanatory
10. Name of Immediate Supervisor : Self-explanatory
11. Title of Supervisor: Self-explanatory
12. Supervisor Contact Information: Self-explanatory

II. Outside Activity Information

Report all outside activities and employment approved by the HHS-520 and any activities in which you engaged that should have received advanced approval. Report activities and employment which may have been approved in a previous year but which occurred at any time the calendar year covered by the report (2005).

Note that each line is designated with a letter. In the following section, add information about **each** activity by letter.

1. Outside Activity List: Complete the information requested.
 - Outside Activity – teaching, consulting, professional practice, coach, etc.
 - Person or Organization – name of the entity for which you work.
 - Approval Date – date of the latest approval to engage in the Outside Activity.
 - Add a checkmark (✓) to indicate whether you actually engaged in the activity.
2. Duration: Self-explanatory: Enter the actual dates and times.
 - Beginning Date – The date the activity started.
 - Service Date(s) – The Dates you actually engaged in the activity (may be different from date started).
 - Hours Spent – Total number of hours you worked on the activity in 2005.
 - Leave Used – Total number of hours of leave you used to work on the activity.
 - Ending Date – The date you completed the work associated with the activity.
 - Renewal Anticipated – Indicate whether you expect to request renewal of the activity during the 30 days preceding the end date (January 2006).
3. Income and/or Reimbursements Paid: Read the instructions carefully. Report travel expenses reimbursed or provided in kind separate from payment, e.g., honorarium, fee, etc.
4. Income and/or Reimbursements Due: Read the instructions carefully. Report travel expenses, reimbursements, and/or payment you expect to receive but have not yet received.
5. Employee Questions: Self-explanatory. If you need more space, continue on page 10 of the form.
6. Certification. Carefully read the certification: Sign and date the form indicating that you have read it and reported everything accurately.

Make a copy for yourself and forward the completed form HHS-521 to your supervisor.

III. Supervisor Review

1. Read the Summary of Applicable Law. Contact the Program Integrity and Ethics Staff (PIES) if you have questions.

2. Review report and any additional information. Mark the appropriate box, sign, and date. Add any comments in block #3.
3. Comments: Self-explanatory

Forward the completed form HHS-521 to PIES.

IV. Management/Committee/Other Intermediate Review

1. Name of Reviewer: Bertha Sandoval
2. Title of Reviewer: Analyst, PIES
3. Reviewer Contact Information: Self-explanatory
4. Organization: IHS/Office/Division
5. Committee: Not Applicable
6. Review: Check the appropriate box, sign, and date.
7. Comments: Any additional comments and recommendations.

V. Agency Ethics Official Review

1. Name of Agency Ethics Official: Robert G. McSwain
2. Title of Agency Ethics Official: Deputy Ethics Counselor
3. Agency Ethics Official Contact Information: Self-explanatory
4. Organization: Self-explanatory
5. Ethics Review: Leave blank. This will be completed by the Program Integrity and Ethics Staff and the Deputy Ethics Counselor.
6. Comments: Supervisor signs and dates with concurrence/non-concurrence. Make a copy of the full report, for the employee. The original HHS-521 will be sent to PIES.

The employee must receive a signed copy of the completed/reviewed/signed HHS-521.